# Office of the Treasurer-Tax Collector Contra Costa County

### **REQUEST FOR PENALTY CANCELLATION – COVID-19 IMPACT**

(Revised July 1, 2020)

#### SEE BACKSIDE OF THIS FORM FOR REQUIRED PAYMENT AMOUNT TO SUBMIT WITH THIS REQUEST

Name(s):					
Parcel / Account Numb	Primary Residence:				
Mailing Address:					
City:		State:	Zip Code:		
Daytime Phone No. (	)	Alternate Phone No. (	Alternate Phone No. ( )		
Email Address (Optiona	al):				
II. Check the type of ta	ax bill being requested for	r penalty cancellation:			
FY 2019-2020	Redemption Tax (Secu	red/Supplemental)	Unsecured Tax $\ \square$		
FY 2020-2021	Secured Tax □	Supplemental Tax □	Unsecured Tax □		
The failure to pay the pr	COVID-19 pandemic, or an operty taxes timely was du care, there was no willful ne	e to circumstances beyond	d my control, occurred in spite		
			e foregoing statement is true ar		
Signature of Assessee of			yonu.		

## PLEASE CAREFULLY REVIEW THE FOLLOWING IMPORTANT INFORMATION BEFORE COMPLETING AND SUBMITTING YOUR REQUEST

#### **INSTRUCTIONS:**

- 1. Use of this Request form is limited to taxes becoming delinquent **between** March 4, 2020 and May 6, 2021.
- 2. A separate Request form must be submitted for each property tax bill you are requesting penalty cancellation.
- 3. Under Executive Order N-61-20, a taxpayer may submit a Request form for the following types of properties:
  - a. Owner-occupied residential real property **except** property for which taxes are paid through an impound account.
  - b. Real property owned and operated by a taxpayer that qualifies as a small business under the Small Business Administration's Regulations.
- 4. Complete all sections of the Request form, then sign and date it. *Incomplete Request forms will be denied*.
- 5. Make check payment to submit with the Request form for the total amount of the following, where applicable:

#### For 2019-2020 Taxes

Choose either one of the following:

- a. Full amount of all taxes that qualify for penalty cancellation, excluding penalties and interests, or
- b. Partial amount per <u>COVID-19 Installment Agreement</u>. A minimum of 20% is required for the initial payment with the balance paid in full by May 6, 2021. See our website <u>www.cctax.us</u> for details.

#### For 2020-2021 Taxes

- a. Full amount of unpaid taxes, excluding penalties, that became delinquent before May 6, 2021.
- 6. Attach all available supporting documentation to substantiate your request. Please redact social security numbers and any other confidential information on your supporting documentation. If documentation is not available, please indicate that in your description in section IV of this form.

#### Examples of supporting documentation may include, but are not limited to, the following:

- Note from physician or medical staff or hospital release form indicating COVID-19 related illness
- Employer notification of business closing or employment release due to COVID-19 Health Orders
- Documents showing owner/operator unable to conduct business due to COVID-19 Health Orders
- 7. Mail the completed and signed form, all installment coupon(s), supporting documentation and payment to:

CCC Tax Collectors Office Attn: COVID-19 Penalty Relief P.O. Box 631 Martinez, CA 94553

If after review your request for penalty cancellation is denied, your check payment will be returned to you, and you will be given a certain amount of time to remit a full payment *including penalty* or to submit additional documentation. If the taxes are not paid in full by May 6, 2021, all penalties, costs and interest will also be due.

For Office Use Only						
Date Received:		Pay	ment Submitted:	(Y/N)		
Approved:	Denied:	Ву:		Date:		